

ISSUE SLIP STAPLE AREA (for additional cross references)

PORTION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>insert</i>		<i>4/9/01</i>
O.I.P.E. CLASSIFIER		<i>48</i>	<i>5/2/01</i>
FORMALITY REVIEW	<i>MH</i>	<i>920</i>	<i>05-18-01</i>
RESPONSE FORMALITY REVIEW	<i>A M</i>	<i>580</i>	<i>08-09-01</i>

INDEX OF CLAIMS

☒ ..... Rejected  
☐ ..... Allowed  
 (Through numeral)..... Canceled  
☐ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

TITLE APPLICANTS

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Form PTO  
(Rev. 6/99)

*4/21/01*  
*5/2/01*  
*8/9/01*

If more than 150 claims or 10 actions  
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